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**MOTOROLA**

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10

Number of Pages (including this page)

Date: 03/12/2006

To: Commissioner for Patents

Location: United States Patent and Trademark Office

Fax No.: (571) 273-8300

From: Hisashi D. Watanabe

Registration No. 37,465

Subject: Serial No. 09/545,446

Docket No. CAS0027

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Enclosed herewith, please find:

- ☒ Petition for Revival
- ☒ Amendment (5 pages)
- ☒ Transmittal Form
- ☒ Fee Transmittal Form

**PLEASE GIVE THESE PAPERS TO:**

EXAMINER:

Hong, Harry S.

GROUP ART UNIT:

2642

SERIAL NO.:

09/545,446

FILED:

04/07/2000

INVENTOR:

Albal, Nandakishore et al.

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|   |                      |                            |
|---|----------------------|----------------------------|
| <b>TRANSMITTAL FORM</b><br>(to be used for all correspondence after initial filing) | Application Number   | 09/545,446                 |
|   | Filing Date          | 04/07/2000                 |
|   | First Named Inventor | Albal, Nandakishore et al. |
|   | Group Art Unit       | 2642                       |
|   | Examiner Name        | Hong, Harry S.             |
| Total Number of Pages in this Submission  | 8                    | Attorney Docket Number     |
|   |                      | CAS0027                    |

| ENCLOSURES  |  | (check all that apply)  |
|---|--|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><input checked="" type="checkbox"/> Amendment/Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/Declaration(s)<br><input type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Certified Copy of Priority Documents<br><input type="checkbox"/> Response to Missing Parts/Incomplete Application<br><input type="checkbox"/> Response to Missing Parts Under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-Related papers<br><input checked="" type="checkbox"/> Petition for Revival<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CDs _____ | <input type="checkbox"/> After Allowance Communication to Group<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter with appropriate copies<br><input type="checkbox"/> Other Enclosure(s) (please identify below) |
| Remarks   |  |   |

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

|                    |                            |                  |        |
|--------------------|----------------------------|------------------|--------|
| Firm or Individual | Hisashi D. Watanabe        | Registration No. | 37,465 |
| Signature          | <i>Hisashi D. Watanabe</i> |                  |        |
| Date               | 03/13/2006                 |                  |        |

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| Typed or printed name | Jennifer Magness        |      |            |
| Signature             | <i>Jennifer Magness</i> | Date | 03/13/2006 |

MAR 13 2006

|  |  |                          |                            |
|--|--|--------------------------|----------------------------|
| <b>FEE TRANSMITTAL</b><br>Patent fees are subject to annual revision<br><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 |  | <b>Complete if Known</b> |                            |
|  |  | Application Number       | 09/545,446                 |
|  |  | Filing Date              | 04/07/2000                 |
|  |  | First Named Inventor     | Albal, Nandakishore et al. |
|  |  | Examiner Name            | Hong, Harry S.             |
|  |  | Group Art Unit           | 2642                       |
| TOTAL AMOUNT OF PAYMENT  |  | (\$) <b>1,500.00</b>     |                            |
|  |  | Attorney Docket No.      | CAS0027                    |

| METHOD OF PAYMENT (check all that apply)   |                          |  |                          |  |                          | FEE CALCULATION (continued)   |                          |  |                          |                    |                  |             |                                    |                |                       |   |                       |                |                       |         |                                     |               |     |      |     |                                     |      |        |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |         |       |   |      |     |      |     |  |             |     |      |     |   |      |      |      |   |  |      |      |      |     |  |          |                       |      |      |  |   |     |      |                           |                  |      |              |              |          |  |                           |          |               |     |                          |      |      |      |      |   |   |     |      |     |                                  |      |      |               |              |                                    |               |      |               |     |                                |   |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
|--|--------------------------|--|--------------------------|--|--------------------------|---|--------------------------|--|--------------------------|--------------------|------------------|-------------|------------------------------------|----------------|-----------------------|---|-----------------------|----------------|-----------------------|---------|-------------------------------------|---------------|-----|------|-----|-------------------------------------|------|--------|------|-----|---------------------------|------|------|------|------|---|------|------|------|------|--|------|-------|---------|-------|---|------|-----|------|-----|--|-------------|-----|------|-----|---|------|------|------|---|--|------|------|------|-----|--|----------|-----------------------|------|------|--|---|-----|------|---------------------------|------------------|------|--------------|--------------|----------|--|---------------------------|----------|---------------|-----|--------------------------|------|------|------|------|---|---|-----|------|-----|----------------------------------|------|------|---------------|--------------|------------------------------------|---------------|------|---------------|-----|--------------------------------|---|-----|------|-----|------------------|------|-----|--|-----|-----------------|------|-----|------|-----|-------------------------------|------|----|------|----|-------------------------------------|------|-----|------|-----|-------------------|------|----|------|----|--|------|-----|------|-----|---|------|-----|------|-----|--|------|-----|------|-----|-----------------------------------|------|-----|------|-----|---|
| Check  | <input type="checkbox"/> | Credit card                                      | <input type="checkbox"/> | Money Order  | <input type="checkbox"/> | Other   | <input type="checkbox"/> | None   | <input type="checkbox"/> | 4. ADDITIONAL FEES |                  |             |                                    |                |                       |   |                       |                |                       |         |                                     |               |     |      |     |                                     |      |        |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |         |       |   |      |     |      |     |  |             |     |      |     |   |      |      |      |   |  |      |      |      |     |  |          |                       |      |      |  |   |     |      |                           |                  |      |              |              |          |  |                           |          |               |     |                          |      |      |      |      |   |   |     |      |     |                                  |      |      |               |              |                                    |               |      |               |     |                                |   |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| <input checked="" type="checkbox"/> Deposit Account:<br>Deposit Account Number <b>502117</b><br>Deposit Account Name <b>Motorola, Inc.</b><br>The Director is authorized to: (check all that apply)<br><input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Credit any overpayments<br><input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17<br><input type="checkbox"/> Charge fees(s) indicated below, except for the filing fee to the above-identified deposit account.   |                          |  |                          |  |                          | <table border="1"> <thead> <tr> <th>Large Entry</th> <th>Fee</th> <th>Small Entry</th> <th>Fee</th> <th>Fee Description</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td>Surcharge - late filing fee or oath</td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td>Surcharge - late Provisional filing</td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130</td><td>Non-English specification</td></tr> <tr><td>1812</td><td>2520</td><td>1812</td><td>2520</td><td>For filing a request for ex parte Reexamination</td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td></tr> <tr><td>1805</td><td>1840*</td><td>1805</td><td>1840*</td><td>Requesting publication of SIR after Examiner action</td></tr> <tr><td>1251</td><td>120</td><td>2251</td><td>60</td><td>Extension for reply within first month</td></tr> <tr><td>1252</td><td>450</td><td>2252</td><td>225</td><td>Extension for reply within second month</td></tr> <tr><td>1253</td><td>1020</td><td>2253</td><td>510</td><td>Extension for reply within third month</td></tr> <tr><td>1254</td><td>1590</td><td>2254</td><td>795</td><td>Extension for reply within fourth month</td></tr> <tr><td>1255</td><td>2160</td><td>2255</td><td>1080</td><td>Extension for reply within fifth month</td></tr> <tr><td>1401</td><td>500</td><td>2401</td><td>250</td><td>Notice of Appeal</td></tr> <tr><td>1402</td><td>500</td><td>2402</td><td>250</td><td>Filing a brief in support of an appeal</td></tr> <tr><td>1403</td><td>1000</td><td>2403</td><td>500</td><td>Request for oral hearing</td></tr> <tr><td>1451</td><td>1510</td><td>1451</td><td>1510</td><td>Petition to institute a public use proceeding</td></tr> <tr><td>1452</td><td>500</td><td>2452</td><td>250</td><td>Petition to revive - unavoidable</td></tr> <tr><td>1453</td><td>1500</td><td>2453</td><td>750</td><td>Petition to revive - unintentional</td></tr> <tr><td>1501</td><td>1400</td><td>2501</td><td>700</td><td>Utility issue fee (or reissue)</td></tr> <tr><td>1502</td><td>800</td><td>2502</td><td>400</td><td>Design issue fee</td></tr> <tr><td>1504</td><td>300</td><td></td><td>300</td><td>Publication fee</td></tr> <tr><td>1460</td><td>130</td><td>1460</td><td>130</td><td>Petitions to the Commissioner</td></tr> <tr><td>1807</td><td>50</td><td>1807</td><td>50</td><td>Processing fee under 37 CFR 1.17(c)</td></tr> <tr><td>1806</td><td>180</td><td>1806</td><td>180</td><td>Submission of IDS</td></tr> <tr><td>8021</td><td>40</td><td>8021</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td></tr> <tr><td>1809</td><td>790</td><td>2809</td><td>395</td><td>Filing a submission after final rejection (37 CFR § 1.122(a))</td></tr> <tr><td>1810</td><td>790</td><td>2810</td><td>395</td><td>For each additional invention to be examined (37 CFR § 1.122(b))</td></tr> <tr><td>1801</td><td>790</td><td>2801</td><td>395</td><td>Request for Continued Examination</td></tr> <tr><td>1802</td><td>900</td><td>1802</td><td>900</td><td>Request for expedited examination of a design application</td></tr> </tbody> </table> |                          |  |                          |                    |                  | Large Entry | Fee                                | Small Entry    | Fee                   | Fee Description   | 1051                  | 130            | 2051                  | 65      | Surcharge - late filing fee or oath | 1052          | 50  | 2052 | 25  | Surcharge - late Provisional filing | 1053 | 130    | 1053 | 130 | Non-English specification | 1812 | 2520 | 1812 | 2520 | For filing a request for ex parte Reexamination | 1804 | 920* | 1804 | 920* | Requesting publication of SIR prior to Examiner action | 1805 | 1840* | 1805    | 1840* | Requesting publication of SIR after Examiner action | 1251 | 120 | 2251 | 60  | Extension for reply within first month | 1252        | 450 | 2252 | 225 | Extension for reply within second month | 1253 | 1020 | 2253 | 510   | Extension for reply within third month | 1254 | 1590 | 2254 | 795 | Extension for reply within fourth month  | 1255     | 2160                  | 2255 | 1080 | Extension for reply within fifth month | 1401  | 500 | 2401 | 250                       | Notice of Appeal | 1402 | 500          | 2402         | 250      | Filing a brief in support of an appeal | 1403                      | 1000     | 2403          | 500 | Request for oral hearing | 1451 | 1510 | 1451 | 1510 | Petition to institute a public use proceeding | 1452  | 500 | 2452 | 250 | Petition to revive - unavoidable | 1453 | 1500 | 2453          | 750          | Petition to revive - unintentional | 1501          | 1400 | 2501          | 700 | Utility issue fee (or reissue) | 1502  | 800 | 2502 | 400 | Design issue fee | 1504 | 300 |  | 300 | Publication fee | 1460 | 130 | 1460 | 130 | Petitions to the Commissioner | 1807 | 50 | 1807 | 50 | Processing fee under 37 CFR 1.17(c) | 1806 | 180 | 1806 | 180 | Submission of IDS | 8021 | 40 | 8021 | 40 | Recording each patent assignment per property (times number of properties) | 1809 | 790 | 2809 | 395 | Filing a submission after final rejection (37 CFR § 1.122(a)) | 1810 | 790 | 2810 | 395 | For each additional invention to be examined (37 CFR § 1.122(b)) | 1801 | 790 | 2801 | 395 | Request for Continued Examination | 1802 | 900 | 1802 | 900 | Request for expedited examination of a design application |
| Large Entry  | Fee                      | Small Entry                                      | Fee                      | Fee Description  |                          |   |                          |  |                          |                    |                  |             |                                    |                |                       |   |                       |                |                       |         |                                     |               |     |      |     |                                     |      |        |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |         |       |   |      |     |      |     |  |             |     |      |     |   |      |      |      |   |  |      |      |      |     |  |          |                       |      |      |  |   |     |      |                           |                  |      |              |              |          |  |                           |          |               |     |                          |      |      |      |      |   |   |     |      |     |                                  |      |      |               |              |                                    |               |      |               |     |                                |   |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 1051   | 130                      | 2051   | 65                       | Surcharge - late filing fee or oath  |                          |   |                          |  |                          |                    |                  |             |                                    |                |                       |   |                       |                |                       |         |                                     |               |     |      |     |                                     |      |        |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |         |       |   |      |     |      |     |  |             |     |      |     |   |      |      |      |   |  |      |      |      |     |  |          |                       |      |      |  |   |     |      |                           |                  |      |              |              |          |  |                           |          |               |     |                          |      |      |      |      |   |   |     |      |     |                                  |      |      |               |              |                                    |               |      |               |     |                                |   |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 1052   | 50                       | 2052   | 25                       | Surcharge - late Provisional filing  |                          |   |                          |  |                          |                    |                  |             |                                    |                |                       |   |                       |                |                       |         |                                     |               |     |      |     |                                     |      |        |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |         |       |   |      |     |      |     |  |             |     |      |     |   |      |      |      |   |  |      |      |      |     |  |          |                       |      |      |  |   |     |      |                           |                  |      |              |              |          |  |                           |          |               |     |                          |      |      |      |      |   |   |     |      |     |                                  |      |      |               |              |                                    |               |      |               |     |                                |   |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 1053   | 130                      | 1053   | 130                      | Non-English specification  |                          |   |                          |  |                          |                    |                  |             |                                    |                |                       |   |                       |                |                       |         |                                     |               |     |      |     |                                     |      |        |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |         |       |   |      |     |      |     |  |             |     |      |     |   |      |      |      |   |  |      |      |      |     |  |          |                       |      |      |  |   |     |      |                           |                  |      |              |              |          |  |                           |          |               |     |                          |      |      |      |      |   |   |     |      |     |                                  |      |      |               |              |                                    |               |      |               |     |                                |   |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 1812   | 2520                     | 1812   | 2520                     | For filing a request for ex parte Reexamination                            |                          |   |                          |  |                          |                    |                  |             |                                    |                |                       |   |                       |                |                       |         |                                     |               |     |      |     |                                     |      |        |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |         |       |   |      |     |      |     |  |             |     |      |     |   |      |      |      |   |  |      |      |      |     |  |          |                       |      |      |  |   |     |      |                           |                  |      |              |              |          |  |                           |          |               |     |                          |      |      |      |      |   |   |     |      |     |                                  |      |      |               |              |                                    |               |      |               |     |                                |   |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 1804   | 920*                     | 1804   | 920*                     | Requesting publication of SIR prior to Examiner action                     |                          |   |                          |  |                          |                    |                  |             |                                    |                |                       |   |                       |                |                       |         |                                     |               |     |      |     |                                     |      |        |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |         |       |   |      |     |      |     |  |             |     |      |     |   |      |      |      |   |  |      |      |      |     |  |          |                       |      |      |  |   |     |      |                           |                  |      |              |              |          |  |                           |          |               |     |                          |      |      |      |      |   |   |     |      |     |                                  |      |      |               |              |                                    |               |      |               |     |                                |   |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 1805   | 1840*                    | 1805   | 1840*                    | Requesting publication of SIR after Examiner action                        |                          |   |                          |  |                          |                    |                  |             |                                    |                |                       |   |                       |                |                       |         |                                     |               |     |      |     |                                     |      |        |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |         |       |   |      |     |      |     |  |             |     |      |     |   |      |      |      |   |  |      |      |      |     |  |          |                       |      |      |  |   |     |      |                           |                  |      |              |              |          |  |                           |          |               |     |                          |      |      |      |      |   |   |     |      |     |                                  |      |      |               |              |                                    |               |      |               |     |                                |   |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 1251   | 120                      | 2251   | 60                       | Extension for reply within first month                                     |                          |   |                          |  |                          |                    |                  |             |                                    |                |                       |   |                       |                |                       |         |                                     |               |     |      |     |                                     |      |        |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |         |       |   |      |     |      |     |  |             |     |      |     |   |      |      |      |   |  |      |      |      |     |  |          |                       |      |      |  |   |     |      |                           |                  |      |              |              |          |  |                           |          |               |     |                          |      |      |      |      |   |   |     |      |     |                                  |      |      |               |              |                                    |               |      |               |     |                                |   |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 1252   | 450                      | 2252   | 225                      | Extension for reply within second month                                    |                          |   |                          |  |                          |                    |                  |             |                                    |                |                       |   |                       |                |                       |         |                                     |               |     |      |     |                                     |      |        |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |         |       |   |      |     |      |     |  |             |     |      |     |   |      |      |      |   |  |      |      |      |     |  |          |                       |      |      |  |   |     |      |                           |                  |      |              |              |          |  |                           |          |               |     |                          |      |      |      |      |   |   |     |      |     |                                  |      |      |               |              |                                    |               |      |               |     |                                |   |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 1253   | 1020                     | 2253   | 510                      | Extension for reply within third month                                     |                          |   |                          |  |                          |                    |                  |             |                                    |                |                       |   |                       |                |                       |         |                                     |               |     |      |     |                                     |      |        |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |         |       |   |      |     |      |     |  |             |     |      |     |   |      |      |      |   |  |      |      |      |     |  |          |                       |      |      |  |   |     |      |                           |                  |      |              |              |          |  |                           |          |               |     |                          |      |      |      |      |   |   |     |      |     |                                  |      |      |               |              |                                    |               |      |               |     |                                |   |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 1254   | 1590                     | 2254   | 795                      | Extension for reply within fourth month                                    |                          |   |                          |  |                          |                    |                  |             |                                    |                |                       |   |                       |                |                       |         |                                     |               |     |      |     |                                     |      |        |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |         |       |   |      |     |      |     |  |             |     |      |     |   |      |      |      |   |  |      |      |      |     |  |          |                       |      |      |  |   |     |      |                           |                  |      |              |              |          |  |                           |          |               |     |                          |      |      |      |      |   |   |     |      |     |                                  |      |      |               |              |                                    |               |      |               |     |                                |   |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 1255   | 2160                     | 2255   | 1080                     | Extension for reply within fifth month                                     |                          |   |                          |  |                          |                    |                  |             |                                    |                |                       |   |                       |                |                       |         |                                     |               |     |      |     |                                     |      |        |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |         |       |   |      |     |      |     |  |             |     |      |     |   |      |      |      |   |  |      |      |      |     |  |          |                       |      |      |  |   |     |      |                           |                  |      |              |              |          |  |                           |          |               |     |                          |      |      |      |      |   |   |     |      |     |                                  |      |      |               |              |                                    |               |      |               |     |                                |   |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 1401   | 500                      | 2401   | 250                      | Notice of Appeal   |                          |   |                          |  |                          |                    |                  |             |                                    |                |                       |   |                       |                |                       |         |                                     |               |     |      |     |                                     |      |        |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |         |       |   |      |     |      |     |  |             |     |      |     |   |      |      |      |   |  |      |      |      |     |  |          |                       |      |      |  |   |     |      |                           |                  |      |              |              |          |  |                           |          |               |     |                          |      |      |      |      |   |   |     |      |     |                                  |      |      |               |              |                                    |               |      |               |     |                                |   |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 1402   | 500                      | 2402   | 250                      | Filing a brief in support of an appeal                                     |                          |   |                          |  |                          |                    |                  |             |                                    |                |                       |   |                       |                |                       |         |                                     |               |     |      |     |                                     |      |        |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |         |       |   |      |     |      |     |  |             |     |      |     |   |      |      |      |   |  |      |      |      |     |  |          |                       |      |      |  |   |     |      |                           |                  |      |              |              |          |  |                           |          |               |     |                          |      |      |      |      |   |   |     |      |     |                                  |      |      |               |              |                                    |               |      |               |     |                                |   |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 1403   | 1000                     | 2403   | 500                      | Request for oral hearing   |                          |   |                          |  |                          |                    |                  |             |                                    |                |                       |   |                       |                |                       |         |                                     |               |     |      |     |                                     |      |        |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |         |       |   |      |     |      |     |  |             |     |      |     |   |      |      |      |   |  |      |      |      |     |  |          |                       |      |      |  |   |     |      |                           |                  |      |              |              |          |  |                           |          |               |     |                          |      |      |      |      |   |   |     |      |     |                                  |      |      |               |              |                                    |               |      |               |     |                                |   |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 1451   | 1510                     | 1451   | 1510                     | Petition to institute a public use proceeding                              |                          |   |                          |  |                          |                    |                  |             |                                    |                |                       |   |                       |                |                       |         |                                     |               |     |      |     |                                     |      |        |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |         |       |   |      |     |      |     |  |             |     |      |     |   |      |      |      |   |  |      |      |      |     |  |          |                       |      |      |  |   |     |      |                           |                  |      |              |              |          |  |                           |          |               |     |                          |      |      |      |      |   |   |     |      |     |                                  |      |      |               |              |                                    |               |      |               |     |                                |   |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 1452   | 500                      | 2452   | 250                      | Petition to revive - unavoidable   |                          |   |                          |  |                          |                    |                  |             |                                    |                |                       |   |                       |                |                       |         |                                     |               |     |      |     |                                     |      |        |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |         |       |   |      |     |      |     |  |             |     |      |     |   |      |      |      |   |  |      |      |      |     |  |          |                       |      |      |  |   |     |      |                           |                  |      |              |              |          |  |                           |          |               |     |                          |      |      |      |      |   |   |     |      |     |                                  |      |      |               |              |                                    |               |      |               |     |                                |   |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 1453   | 1500                     | 2453   | 750                      | Petition to revive - unintentional   |                          |   |                          |  |                          |                    |                  |             |                                    |                |                       |   |                       |                |                       |         |                                     |               |     |      |     |                                     |      |        |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |         |       |   |      |     |      |     |  |             |     |      |     |   |      |      |      |   |  |      |      |      |     |  |          |                       |      |      |  |   |     |      |                           |                  |      |              |              |          |  |                           |          |               |     |                          |      |      |      |      |   |   |     |      |     |                                  |      |      |               |              |                                    |               |      |               |     |                                |   |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 1501   | 1400                     | 2501   | 700                      | Utility issue fee (or reissue)   |                          |   |                          |  |                          |                    |                  |             |                                    |                |                       |   |                       |                |                       |         |                                     |               |     |      |     |                                     |      |        |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |         |       |   |      |     |      |     |  |             |     |      |     |   |      |      |      |   |  |      |      |      |     |  |          |                       |      |      |  |   |     |      |                           |                  |      |              |              |          |  |                           |          |               |     |                          |      |      |      |      |   |   |     |      |     |                                  |      |      |               |              |                                    |               |      |               |     |                                |   |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 1502   | 800                      | 2502   | 400                      | Design issue fee   |                          |   |                          |  |                          |                    |                  |             |                                    |                |                       |   |                       |                |                       |         |                                     |               |     |      |     |                                     |      |        |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |         |       |   |      |     |      |     |  |             |     |      |     |   |      |      |      |   |  |      |      |      |     |  |          |                       |      |      |  |   |     |      |                           |                  |      |              |              |          |  |                           |          |               |     |                          |      |      |      |      |   |   |     |      |     |                                  |      |      |               |              |                                    |               |      |               |     |                                |   |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 1504   | 300                      |  | 300                      | Publication fee  |                          |   |                          |  |                          |                    |                  |             |                                    |                |                       |   |                       |                |                       |         |                                     |               |     |      |     |                                     |      |        |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |         |       |   |      |     |      |     |  |             |     |      |     |   |      |      |      |   |  |      |      |      |     |  |          |                       |      |      |  |   |     |      |                           |                  |      |              |              |          |  |                           |          |               |     |                          |      |      |      |      |   |   |     |      |     |                                  |      |      |               |              |                                    |               |      |               |     |                                |   |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 1460   | 130                      | 1460   | 130                      | Petitions to the Commissioner  |                          |   |                          |  |                          |                    |                  |             |                                    |                |                       |   |                       |                |                       |         |                                     |               |     |      |     |                                     |      |        |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |         |       |   |      |     |      |     |  |             |     |      |     |   |      |      |      |   |  |      |      |      |     |  |          |                       |      |      |  |   |     |      |                           |                  |      |              |              |          |  |                           |          |               |     |                          |      |      |      |      |   |   |     |      |     |                                  |      |      |               |              |                                    |               |      |               |     |                                |   |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 1807   | 50                       | 1807   | 50                       | Processing fee under 37 CFR 1.17(c)  |                          |   |                          |  |                          |                    |                  |             |                                    |                |                       |   |                       |                |                       |         |                                     |               |     |      |     |                                     |      |        |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |         |       |   |      |     |      |     |  |             |     |      |     |   |      |      |      |   |  |      |      |      |     |  |          |                       |      |      |  |   |     |      |                           |                  |      |              |              |          |  |                           |          |               |     |                          |      |      |      |      |   |   |     |      |     |                                  |      |      |               |              |                                    |               |      |               |     |                                |   |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 1806   | 180                      | 1806   | 180                      | Submission of IDS  |                          |   |                          |  |                          |                    |                  |             |                                    |                |                       |   |                       |                |                       |         |                                     |               |     |      |     |                                     |      |        |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |         |       |   |      |     |      |     |  |             |     |      |     |   |      |      |      |   |  |      |      |      |     |  |          |                       |      |      |  |   |     |      |                           |                  |      |              |              |          |  |                           |          |               |     |                          |      |      |      |      |   |   |     |      |     |                                  |      |      |               |              |                                    |               |      |               |     |                                |   |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 8021   | 40                       | 8021   | 40                       | Recording each patent assignment per property (times number of properties) |                          |   |                          |  |                          |                    |                  |             |                                    |                |                       |   |                       |                |                       |         |                                     |               |     |      |     |                                     |      |        |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |         |       |   |      |     |      |     |  |             |     |      |     |   |      |      |      |   |  |      |      |      |     |  |          |                       |      |      |  |   |     |      |                           |                  |      |              |              |          |  |                           |          |               |     |                          |      |      |      |      |   |   |     |      |     |                                  |      |      |               |              |                                    |               |      |               |     |                                |   |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 1809   | 790                      | 2809   | 395                      | Filing a submission after final rejection (37 CFR § 1.122(a))              |                          |   |                          |  |                          |                    |                  |             |                                    |                |                       |   |                       |                |                       |         |                                     |               |     |      |     |                                     |      |        |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |         |       |   |      |     |      |     |  |             |     |      |     |   |      |      |      |   |  |      |      |      |     |  |          |                       |      |      |  |   |     |      |                           |                  |      |              |              |          |  |                           |          |               |     |                          |      |      |      |      |   |   |     |      |     |                                  |      |      |               |              |                                    |               |      |               |     |                                |   |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 1810   | 790                      | 2810   | 395                      | For each additional invention to be examined (37 CFR § 1.122(b))           |                          |   |                          |  |                          |                    |                  |             |                                    |                |                       |   |                       |                |                       |         |                                     |               |     |      |     |                                     |      |        |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |         |       |   |      |     |      |     |  |             |     |      |     |   |      |      |      |   |  |      |      |      |     |  |          |                       |      |      |  |   |     |      |                           |                  |      |              |              |          |  |                           |          |               |     |                          |      |      |      |      |   |   |     |      |     |                                  |      |      |               |              |                                    |               |      |               |     |                                |   |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 1801   | 790                      | 2801   | 395                      | Request for Continued Examination  |                          |   |                          |  |                          |                    |                  |             |                                    |                |                       |   |                       |                |                       |         |                                     |               |     |      |     |                                     |      |        |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |         |       |   |      |     |      |     |  |             |     |      |     |   |      |      |      |   |  |      |      |      |     |  |          |                       |      |      |  |   |     |      |                           |                  |      |              |              |          |  |                           |          |               |     |                          |      |      |      |      |   |   |     |      |     |                                  |      |      |               |              |                                    |               |      |               |     |                                |   |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 1802   | 900                      | 1802   | 900                      | Request for expedited examination of a design application                  |                          |   |                          |  |                          |                    |                  |             |                                    |                |                       |   |                       |                |                       |         |                                     |               |     |      |     |                                     |      |        |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |         |       |   |      |     |      |     |  |             |     |      |     |   |      |      |      |   |  |      |      |      |     |  |          |                       |      |      |  |   |     |      |                           |                  |      |              |              |          |  |                           |          |               |     |                          |      |      |      |      |   |   |     |      |     |                                  |      |      |               |              |                                    |               |      |               |     |                                |   |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| <b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b><br><table border="1"> <thead> <tr> <th rowspan="2">Application Type</th> <th colspan="2">FILING FEES</th> <th colspan="2">SEARCH FEES</th> <th colspan="2">EXAMINATION FEES</th> <th rowspan="2">Fee Paid (\$)</th> </tr> <tr> <th>Large Fee (\$)</th> <th>Small Entity Fee (\$)</th> <th>Large Fee (\$)</th> <th>Small Entity Fee (\$)</th> <th>Large Fee (\$)</th> <th>Small Entity Fee (\$)</th> </tr> </thead> <tbody> <tr><td>Utility</td><td>300</td><td>150</td><td>500</td><td>250</td><td>200</td><td>100</td><td></td></tr> <tr><td>Design</td><td>200</td><td>100</td><td>100</td><td>50</td><td>130</td><td>65</td><td></td></tr> <tr><td>Plant</td><td>200</td><td>100</td><td>300</td><td>150</td><td>160</td><td>80</td><td></td></tr> <tr><td>Reissue</td><td>300</td><td>150</td><td>500</td><td>250</td><td>600</td><td>300</td><td></td></tr> <tr><td>Provisional</td><td>200</td><td>100</td><td>0</td><td>0</td><td>0</td><td>0</td><td></td></tr> </tbody> </table> |                          |  |                          |  |                          | Application Type  | FILING FEES              |  | SEARCH FEES              |                    | EXAMINATION FEES |             | Fee Paid (\$)                      | Large Fee (\$) | Small Entity Fee (\$) | Large Fee (\$)  | Small Entity Fee (\$) | Large Fee (\$) | Small Entity Fee (\$) | Utility | 300                                 | 150           | 500 | 250  | 200 | 100                                 |      | Design | 200  | 100 | 100                       | 50   | 130  | 65   |      | Plant   | 200  | 100  | 300  | 150  | 160  | 80   |       | Reissue | 300   | 150   | 500  | 250 | 600  | 300 |  | Provisional | 200 | 100  | 0   | 0                                       | 0    | 0    |      | <b>2. EXTRA CLAIM FEES</b><br><table border="1"> <thead> <tr> <th>Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent</th> <th>Fee (\$)</th> <th>Small Entity Fee (\$)</th> </tr> </thead> <tbody> <tr><td>50</td><td>50</td><td>25</td></tr> <tr><td>Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent</td><td>200</td><td>100</td></tr> <tr><td>Multiple Dependent Claims</td><td>350</td><td>180</td></tr> </tbody> </table><br><table border="1"> <thead> <tr> <th>Total Claims</th> <th>Extra Claims</th> <th>Fee (\$)</th> <th>Fee Paid (\$)</th> <th>Multiple Dependent Claims</th> <th>Fee (\$)</th> <th>Fee Paid (\$)</th> </tr> </thead> <tbody> <tr> <td>0</td> <td>- 20 or HP = 0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td colspan="7">HP = highest number of total claims paid for, if greater than 3</td> </tr> </tbody> </table><br><table border="1"> <thead> <tr> <th>Indep. Claims</th> <th>Extra Claims</th> <th>Fee (\$)</th> <th>Fee Paid (\$)</th> </tr> </thead> <tbody> <tr> <td>0</td> <td>- 3 or HP = 0</td> <td>0</td> <td>0</td> </tr> <tr> <td colspan="4">HP = highest number of total claims paid for, if greater than 3</td> </tr> </tbody> </table> |  |      |      |      |     | Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent | Fee (\$) | Small Entity Fee (\$) | 50   | 50   | 25                                     | Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent | 200 | 100  | Multiple Dependent Claims | 350              | 180  | Total Claims | Extra Claims | Fee (\$) | Fee Paid (\$)                          | Multiple Dependent Claims | Fee (\$) | Fee Paid (\$) | 0   | - 20 or HP = 0           | 0    | 0    | 0    | 0    | 0   | HP = highest number of total claims paid for, if greater than 3 |     |      |     |                                  |      |      | Indep. Claims | Extra Claims | Fee (\$)                           | Fee Paid (\$) | 0    | - 3 or HP = 0 | 0   | 0                              | HP = highest number of total claims paid for, if greater than 3 |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| Application Type   | FILING FEES              |  | SEARCH FEES              |  | EXAMINATION FEES         |   | Fee Paid (\$)            |  |                          |                    |                  |             |                                    |                |                       |   |                       |                |                       |         |                                     |               |     |      |     |                                     |      |        |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |         |       |   |      |     |      |     |  |             |     |      |     |   |      |      |      |   |  |      |      |      |     |  |          |                       |      |      |  |   |     |      |                           |                  |      |              |              |          |  |                           |          |               |     |                          |      |      |      |      |   |   |     |      |     |                                  |      |      |               |              |                                    |               |      |               |     |                                |   |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
|  | Large Fee (\$)           | Small Entity Fee (\$)                            | Large Fee (\$)           | Small Entity Fee (\$)  | Large Fee (\$)           | Small Entity Fee (\$)   |                          |  |                          |                    |                  |             |                                    |                |                       |   |                       |                |                       |         |                                     |               |     |      |     |                                     |      |        |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |         |       |   |      |     |      |     |  |             |     |      |     |   |      |      |      |   |  |      |      |      |     |  |          |                       |      |      |  |   |     |      |                           |                  |      |              |              |          |  |                           |          |               |     |                          |      |      |      |      |   |   |     |      |     |                                  |      |      |               |              |                                    |               |      |               |     |                                |   |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| Utility  | 300                      | 150  | 500                      | 250  | 200                      | 100   |                          |  |                          |                    |                  |             |                                    |                |                       |   |                       |                |                       |         |                                     |               |     |      |     |                                     |      |        |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |         |       |   |      |     |      |     |  |             |     |      |     |   |      |      |      |   |  |      |      |      |     |  |          |                       |      |      |  |   |     |      |                           |                  |      |              |              |          |  |                           |          |               |     |                          |      |      |      |      |   |   |     |      |     |                                  |      |      |               |              |                                    |               |      |               |     |                                |   |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| Design   | 200                      | 100  | 100                      | 50   | 130                      | 65  |                          |  |                          |                    |                  |             |                                    |                |                       |   |                       |                |                       |         |                                     |               |     |      |     |                                     |      |        |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |         |       |   |      |     |      |     |  |             |     |      |     |   |      |      |      |   |  |      |      |      |     |  |          |                       |      |      |  |   |     |      |                           |                  |      |              |              |          |  |                           |          |               |     |                          |      |      |      |      |   |   |     |      |     |                                  |      |      |               |              |                                    |               |      |               |     |                                |   |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| Plant  | 200                      | 100  | 300                      | 150  | 160                      | 80  |                          |  |                          |                    |                  |             |                                    |                |                       |   |                       |                |                       |         |                                     |               |     |      |     |                                     |      |        |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |         |       |   |      |     |      |     |  |             |     |      |     |   |      |      |      |   |  |      |      |      |     |  |          |                       |      |      |  |   |     |      |                           |                  |      |              |              |          |  |                           |          |               |     |                          |      |      |      |      |   |   |     |      |     |                                  |      |      |               |              |                                    |               |      |               |     |                                |   |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| Reissue  | 300                      | 150  | 500                      | 250  | 600                      | 300   |                          |  |                          |                    |                  |             |                                    |                |                       |   |                       |                |                       |         |                                     |               |     |      |     |                                     |      |        |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |         |       |   |      |     |      |     |  |             |     |      |     |   |      |      |      |   |  |      |      |      |     |  |          |                       |      |      |  |   |     |      |                           |                  |      |              |              |          |  |                           |          |               |     |                          |      |      |      |      |   |   |     |      |     |                                  |      |      |               |              |                                    |               |      |               |     |                                |   |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| Provisional  | 200                      | 100  | 0                        | 0  | 0                        | 0   |                          |  |                          |                    |                  |             |                                    |                |                       |   |                       |                |                       |         |                                     |               |     |      |     |                                     |      |        |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |         |       |   |      |     |      |     |  |             |     |      |     |   |      |      |      |   |  |      |      |      |     |  |          |                       |      |      |  |   |     |      |                           |                  |      |              |              |          |  |                           |          |               |     |                          |      |      |      |      |   |   |     |      |     |                                  |      |      |               |              |                                    |               |      |               |     |                                |   |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent   | Fee (\$)                 | Small Entity Fee (\$)                            |                          |  |                          |   |                          |  |                          |                    |                  |             |                                    |                |                       |   |                       |                |                       |         |                                     |               |     |      |     |                                     |      |        |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |         |       |   |      |     |      |     |  |             |     |      |     |   |      |      |      |   |  |      |      |      |     |  |          |                       |      |      |  |   |     |      |                           |                  |      |              |              |          |  |                           |          |               |     |                          |      |      |      |      |   |   |     |      |     |                                  |      |      |               |              |                                    |               |      |               |     |                                |   |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 50   | 50                       | 25   |                          |  |                          |   |                          |  |                          |                    |                  |             |                                    |                |                       |   |                       |                |                       |         |                                     |               |     |      |     |                                     |      |        |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |         |       |   |      |     |      |     |  |             |     |      |     |   |      |      |      |   |  |      |      |      |     |  |          |                       |      |      |  |   |     |      |                           |                  |      |              |              |          |  |                           |          |               |     |                          |      |      |      |      |   |   |     |      |     |                                  |      |      |               |              |                                    |               |      |               |     |                                |   |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent  | 200                      | 100  |                          |  |                          |   |                          |  |                          |                    |                  |             |                                    |                |                       |   |                       |                |                       |         |                                     |               |     |      |     |                                     |      |        |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |         |       |   |      |     |      |     |  |             |     |      |     |   |      |      |      |   |  |      |      |      |     |  |          |                       |      |      |  |   |     |      |                           |                  |      |              |              |          |  |                           |          |               |     |                          |      |      |      |      |   |   |     |      |     |                                  |      |      |               |              |                                    |               |      |               |     |                                |   |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| Multiple Dependent Claims  | 350                      | 180  |                          |  |                          |   |                          |  |                          |                    |                  |             |                                    |                |                       |   |                       |                |                       |         |                                     |               |     |      |     |                                     |      |        |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |         |       |   |      |     |      |     |  |             |     |      |     |   |      |      |      |   |  |      |      |      |     |  |          |                       |      |      |  |   |     |      |                           |                  |      |              |              |          |  |                           |          |               |     |                          |      |      |      |      |   |   |     |      |     |                                  |      |      |               |              |                                    |               |      |               |     |                                |   |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| Total Claims   | Extra Claims             | Fee (\$)   | Fee Paid (\$)            | Multiple Dependent Claims  | Fee (\$)                 | Fee Paid (\$)   |                          |  |                          |                    |                  |             |                                    |                |                       |   |                       |                |                       |         |                                     |               |     |      |     |                                     |      |        |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |         |       |   |      |     |      |     |  |             |     |      |     |   |      |      |      |   |  |      |      |      |     |  |          |                       |      |      |  |   |     |      |                           |                  |      |              |              |          |  |                           |          |               |     |                          |      |      |      |      |   |   |     |      |     |                                  |      |      |               |              |                                    |               |      |               |     |                                |   |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 0  | - 20 or HP = 0           | 0  | 0                        | 0  | 0                        | 0   |                          |  |                          |                    |                  |             |                                    |                |                       |   |                       |                |                       |         |                                     |               |     |      |     |                                     |      |        |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |         |       |   |      |     |      |     |  |             |     |      |     |   |      |      |      |   |  |      |      |      |     |  |          |                       |      |      |  |   |     |      |                           |                  |      |              |              |          |  |                           |          |               |     |                          |      |      |      |      |   |   |     |      |     |                                  |      |      |               |              |                                    |               |      |               |     |                                |   |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| HP = highest number of total claims paid for, if greater than 3  |                          |  |                          |  |                          |   |                          |  |                          |                    |                  |             |                                    |                |                       |   |                       |                |                       |         |                                     |               |     |      |     |                                     |      |        |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |         |       |   |      |     |      |     |  |             |     |      |     |   |      |      |      |   |  |      |      |      |     |  |          |                       |      |      |  |   |     |      |                           |                  |      |              |              |          |  |                           |          |               |     |                          |      |      |      |      |   |   |     |      |     |                                  |      |      |               |              |                                    |               |      |               |     |                                |   |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| Indep. Claims  | Extra Claims             | Fee (\$)   | Fee Paid (\$)            |  |                          |   |                          |  |                          |                    |                  |             |                                    |                |                       |   |                       |                |                       |         |                                     |               |     |      |     |                                     |      |        |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |         |       |   |      |     |      |     |  |             |     |      |     |   |      |      |      |   |  |      |      |      |     |  |          |                       |      |      |  |   |     |      |                           |                  |      |              |              |          |  |                           |          |               |     |                          |      |      |      |      |   |   |     |      |     |                                  |      |      |               |              |                                    |               |      |               |     |                                |   |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 0  | - 3 or HP = 0            | 0  | 0                        |  |                          |   |                          |  |                          |                    |                  |             |                                    |                |                       |   |                       |                |                       |         |                                     |               |     |      |     |                                     |      |        |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |         |       |   |      |     |      |     |  |             |     |      |     |   |      |      |      |   |  |      |      |      |     |  |          |                       |      |      |  |   |     |      |                           |                  |      |              |              |          |  |                           |          |               |     |                          |      |      |      |      |   |   |     |      |     |                                  |      |      |               |              |                                    |               |      |               |     |                                |   |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| HP = highest number of total claims paid for, if greater than 3  |                          |  |                          |  |                          |   |                          |  |                          |                    |                  |             |                                    |                |                       |   |                       |                |                       |         |                                     |               |     |      |     |                                     |      |        |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |         |       |   |      |     |      |     |  |             |     |      |     |   |      |      |      |   |  |      |      |      |     |  |          |                       |      |      |  |   |     |      |                           |                  |      |              |              |          |  |                           |          |               |     |                          |      |      |      |      |   |   |     |      |     |                                  |      |      |               |              |                                    |               |      |               |     |                                |   |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| <b>3. APPLICATION SIZE FEE</b><br>If the specification and drawings exceed 100 sheets of paper, the application size fee is \$250 (\$125 for small entity)<br>For each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.18(e).<br><table border="1"> <thead> <tr> <th>Total Sheets</th> <th>Extra Sheets</th> <th>Number of each additional 50 or fraction thereof</th> <th>Fee (\$)</th> <th>Fee Paid (\$)</th> </tr> </thead> <tbody> <tr> <td>0</td> <td>- 100 = 0</td> <td>/50 = (round up to a whole number)</td> <td>0</td> <td>0</td> </tr> </tbody> </table>   |                          |  |                          |  |                          | Total Sheets  | Extra Sheets             | Number of each additional 50 or fraction thereof | Fee (\$)                 | Fee Paid (\$)      | 0                | - 100 = 0   | /50 = (round up to a whole number) | 0              | 0                     | <b>5. OTHER FEE(S) (specify)</b><br>Non-English Specification, \$130 fee (no small entity discount)<br><table border="1"> <thead> <tr> <th>Fee Paid (\$)</th> </tr> </thead> <tbody> <tr><td></td></tr> </tbody> </table> |                       |                |                       |         |                                     | Fee Paid (\$) |     |      |     |                                     |      |        |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |         |       |   |      |     |      |     |  |             |     |      |     |   |      |      |      |   |  |      |      |      |     |  |          |                       |      |      |  |   |     |      |                           |                  |      |              |              |          |  |                           |          |               |     |                          |      |      |      |      |   |   |     |      |     |                                  |      |      |               |              |                                    |               |      |               |     |                                |   |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| Total Sheets   | Extra Sheets             | Number of each additional 50 or fraction thereof | Fee (\$)                 | Fee Paid (\$)  |                          |   |                          |  |                          |                    |                  |             |                                    |                |                       |   |                       |                |                       |         |                                     |               |     |      |     |                                     |      |        |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |         |       |   |      |     |      |     |  |             |     |      |     |   |      |      |      |   |  |      |      |      |     |  |          |                       |      |      |  |   |     |      |                           |                  |      |              |              |          |  |                           |          |               |     |                          |      |      |      |      |   |   |     |      |     |                                  |      |      |               |              |                                    |               |      |               |     |                                |   |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| 0  | - 100 = 0                | /50 = (round up to a whole number)               | 0                        | 0  |                          |   |                          |  |                          |                    |                  |             |                                    |                |                       |   |                       |                |                       |         |                                     |               |     |      |     |                                     |      |        |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |         |       |   |      |     |      |     |  |             |     |      |     |   |      |      |      |   |  |      |      |      |     |  |          |                       |      |      |  |   |     |      |                           |                  |      |              |              |          |  |                           |          |               |     |                          |      |      |      |      |   |   |     |      |     |                                  |      |      |               |              |                                    |               |      |               |     |                                |   |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| Fee Paid (\$)  |                          |  |                          |  |                          |   |                          |  |                          |                    |                  |             |                                    |                |                       |   |                       |                |                       |         |                                     |               |     |      |     |                                     |      |        |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |         |       |   |      |     |      |     |  |             |     |      |     |   |      |      |      |   |  |      |      |      |     |  |          |                       |      |      |  |   |     |      |                           |                  |      |              |              |          |  |                           |          |               |     |                          |      |      |      |      |   |   |     |      |     |                                  |      |      |               |              |                                    |               |      |               |     |                                |   |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
|  |                          |  |                          |  |                          |   |                          |  |                          |                    |                  |             |                                    |                |                       |   |                       |                |                       |         |                                     |               |     |      |     |                                     |      |        |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |         |       |   |      |     |      |     |  |             |     |      |     |   |      |      |      |   |  |      |      |      |     |  |          |                       |      |      |  |   |     |      |                           |                  |      |              |              |          |  |                           |          |               |     |                          |      |      |      |      |   |   |     |      |     |                                  |      |      |               |              |                                    |               |      |               |     |                                |   |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |
| <b>SUBMITTED BY</b><br>Name (Print/Type) <b>Hisashi D. Watanabe</b><br>Signature <i>Hisashi D. Watanabe</i>  |                          |  |                          |  |                          | Registration No. <b>37,465</b> Telephone <b>847-523-2322</b><br>Date <b>03/13/2006</b>  |                          |  |                          |                    |                  |             |                                    |                |                       |   |                       |                |                       |         |                                     |               |     |      |     |                                     |      |        |      |     |                           |      |      |      |      |   |      |      |      |      |  |      |       |         |       |   |      |     |      |     |  |             |     |      |     |   |      |      |      |   |  |      |      |      |     |  |          |                       |      |      |  |   |     |      |                           |                  |      |              |              |          |  |                           |          |               |     |                          |      |      |      |      |   |   |     |      |     |                                  |      |      |               |              |                                    |               |      |               |     |                                |   |     |      |     |                  |      |     |  |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |                                   |      |     |      |     |   |